07/16/2006 11:40

(Rev. 02/2003)

Image# 26950270806

## FEC FORM 3X

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines **PlastyPAC** 444 E. Algonquin ADDRESS (number and street) Check if different than previously Arlington Heights IL 60005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00249342 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2006 06 3 0 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. William Seward Type or Print Name of Treasurer Electronically Filed by William Seward 06 15 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use

## Image# 26950270807

## **SUMMARY PAGE**

		FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2	
\		or Type Committee Name astyPAC			
ı	Repor	t Covering the Period: From:	M M D D Y Y Y Y Y Y 2 0 0 6	To: 0 6 3 0 2 0 0	6
			COLUMN A This Period	COLUMN B Calendar Year-to-Date	
6.	(a)	Cash on Hand January 1  Y2006		92291.86	
	(b)	Cash on Hand at Begining of Reporting Period	53516.86		
	(c)	Total Receipts (from Line 19)	50095.00	56320.00	_
	(d)	Subtotal (add lines 6(b) and			
		6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103611.86	148611.86	
7.	Tot	al Disbursements (from Line 31)	0.00	45000.00	•
8.	Cas	sh on Hand at Close of	-		
		porting Period btract Line 7 from Line 6(d))	103611.86	103611.86	
9.	the	ots and Obligations owed TO committee (Itemize all on nedule C and/or Schedule D)	0.00		
10.	the	ots and Obligations owed BY committee (Itemize all on nedule C and/or Schedule D)	0.00		

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name PlastyPAC

Report Covering the Period:

м м 0 4

From:

<sup>D</sup> 0 1

2006

o. 0 6

<sup>D</sup> 3 0

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	44775.00	48800.00
	(ii) Unitemized	5320.00	7520.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	50095.00	56320.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry  Totals to Line 33, page 5)	50095.00	56320.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
0.	to Federal candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	50095.00	56320.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	50095.00	56320.00

## **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party Committees	0.00	0.00
	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	45000.00
	Independent Expenditure (use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:  (a) Individuals/Persons Other  Then Political Committees	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	45000.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	0.00	45000.00
	HOTH LINE OT J	0.00	43000.00

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	50095.00	56320.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50095.00	56320.00
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

S	CHEDULE A (FEC Form 3X)		Harris and a selection of the factor	FOR LINE NUMBER: PAGE 6 / 40
	•		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Dotailou Duillinai y 1 ago	13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. David Abramson			Date of Receipt
	Mailing Address 42a East 74th St.			06 08 2006
	City	State	Zip Code	Transaction ID: SA11A1.4278
	New York	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Darrick Antell			Date of Receipt
	Mailing Address 850 Park Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	
	New York NY		10021	Transaction ID: SA11A1.4498
		INT	10021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Tederal political committee.			
	Name of Employer Self	Occupation		
		Physiciar		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	
	Other (specify)	0 0		]
— С.	Full Name (Last, First, Middle Initial) Dr. Valdemar Ascencio			Date of Receipt
٥.	Mailing Address 23961 Calle De La Mag	dalana		M M / D D / Y Y Y Y
	Suite 200	uaiena		06 16 2006
	City	State	Zip Code	Transaction ID: SA11A1.4385
	Laguna Hills	CA	92653	Amount of Each Receipt this Period
	FEC ID number of contributing			300.00
	federal political committee.	C		300.00
	Name of Employer Self	Occupation		
		Physiciar		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		300.00	1
	Other (specify)		500.00	1
				1300.00
S	UBTOTAL of Receipts This Page (optional)		······	1000.00
1				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 7/40   (check only one)
Ar	ny information copied from such Reports and Statem for commercial purposes, other than using the name	ents may	not be sold or used by any pers	on for the purpose of soliciting contributions
\( \)	NAME OF COMMITTEE (In Full) PlastyPAC	o and add	ness of any political committee to	y solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Dr. Joel Atchison			Date of Receipt
	Mailing Address 4009 6th Ave., Ste. 45			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4375
	Kearney	FL	68845	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			300.00
	Colt	ccupatior hysiciar		
	Receipt For:  Primary General  Other (specify) ▼	ggregate	Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Andrew Aunategui	Date of Receipt		
	Mailing Address 21355 E. Dixie Highway, St	06 16 2006		
	•	State FL	Zip Code 33180	Transaction ID: SA11A1.4420  Amount of Each Receipt this Period
	FFC ID asserbles of a satisfaction			500.00
	Solf '	ccupation hysiciar		
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
c.	· ·			Date of Receipt
	Mailing Address 1715 Stickney Point Road			06 23 2006
	•	State	Zip Code	Transaction ID: SA11A1.4457
	FFO ID assembles of a section state.	FL	34231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
	Colt	ccupatior hysiciar		
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			1050.00
   T	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 8 / 40		
	· ·		Use separate schedule(s) or each category of the	(check only one)		
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any person	on for the purpose of soliciting contributions		
or		ame and add	aress of any political committee to	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
/	PlastyPAC					
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	Dr. Fredric Barr			Date of Receipt		
	Mailing Address 1411 N. Flagler Dr., Ste	. 500		M M / D D / Y Y Y Y		
	City	Ctoto	Zin Codo	06 06 2006		
	West Palm Beach	State FL	Zip Code	Transaction ID: SA11A1.4260		
		1 -	33401	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer	Occupation	1			
	Self	Physician	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	300.00	1		
	Other (specify)					
_	Full Name (Last, First, Middle Initial)					
В.				Date of Receipt		
	Mailing Address 522 N. Elam Ave., Ste.	06 26 2006				
	City	State	Zip Code	Transaction ID: SA11A1.4500		
	Greensboro	NC	27403	Amount of Each Receipt this Period		
	FEC ID number of contributing	C		300.00		
	federal political committee.	9				
	Name of Employer Self	Occupation				
		Physiciar				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼	' '	300.00			
	Office (Specify)			1		
<u> </u>	Full Name (Last, First, Middle Initial) Dr. John Barry Blshop			Date of Receipt		
	Mailing Address 24 Memorial Medical Dr			M M / D D / Y Y Y Y		
				06 11 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4350		
	Greenville	SC	29605	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Self	Occupation	1	-		
	Self	Physician				
	Receipt For:		Year-to-Date ▼			
	Primary General			1		
	Other (specify)		250.00			
_						
				850.00		
S	UBTOTAL of Receipts This Page (optional)		······································	050.00		
	<u> </u>					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NU		PAGE 9/40
	EMIZED RECEIPTS		or each category of the	(check only on		
	LIMIZED RECEIP 13		Detailed Summary Page	X 11a	11b	11c   12
۸.	ov information against from auch Danasta and Staton	nanta mau	not be cold or used by one norse	13	14	15 16 17
or	ny information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may ne and add	ress of any political committee to	solicit contributio	ns from s	uch committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)					
$\rangle$	PlastyPAC					
_						
Δ.	Full Name (Last, First, Middle Initial) Dr. Gregory Bland			Date of Red	ceint	
	Mailing Address 3920 n. Union Blvd., Ste. 3	300		M M /	D D	/ <b>Y Y Y Y</b>
				0 6	0 1	2006
	City	State	Zip Code	Transaction	n ID: SA	11A1.4392
	Colorado Springs	CA	80907	Amount of	Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	С				500.00
	Name of Employer	Occupation	1			
	Self	Physician	ı			
		Aggregate	Year-to-Date ▼			
	Primary General		500.00	1		
	Other (specify)	1 1		J		
 3.	Full Name (Last, First, Middle Initial) Dr. John Borkowski	Date of Red	ceipt			
	Mailing Address 85 Church St.			M M /	DD	/ Y Y Y Y
				0 6	26	2006
	City	State	Zip Code	Transactio	n ID: SA	11A1.4485
	Middletown	СТ	06457	Amount of	Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C				500.00
	Name of Employer	Occupation	l			
		Physician				
		Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		500.00			
	Carici (Specify)	0 0	0 0 0 0 0 0 0	1		
_	Full Name (Last, First, Middle Initial)			Data of Da		
J.	Dr. Michael Brucker  Mailing Address 9850 Genesse Ave.			Date of Red	DDD	/ <b>Y Y Y Y</b>
	Maining Addition 9000 Genesse Ave.			0 6	24	2006
	City	State	Zip Code	Transactio	n ID: SA	11A1.4464
	<u>La Jolla</u>	CA	92037	Amount of	Each Rec	eipt this Period
	FEC ID number of contributing	С				500.00
	rederal political committee.	<u> </u>				
	Colf	Occupation				
		Physician				
		Aggregate	Year-to-Date ▼	.		
	Primary General Other (specify) ▼		500.00			
	Strict (openity)	1 1	0 0 0 0 0 0 0			
					•	1500.00
s	UBTOTAL of Receipts This Page (optional)		<u> </u>	-		1300.00
Т	OTAL This Period (last page this line number only)	)	<b>)</b>			
	(   J = = = = = = = = = = = = = = = = = =		-			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 40	_
	EMIZED RECEIPTS		or each category of the	(check only one)	
••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   1	7
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions	_
or	for commercial purposes, other than using the r	solicit contributions from such committee.	_		
	NAME OF COMMITTEE (In Full)				
	PlastyPAC				
_	Full Name (Last, First, Middle Initial)				_
A.	Dr. Herbert Bunchman			Date of Receipt	
	Mailing Address 1520 S. Dobson Rd., St	e. 314		06 24 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4451	
	Mesa	AZ	85202	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:		· e Year-to-Date ▼		
	Primary General	1 1	300.00	1	
	Other (specify) ▼		300.00		
В.	Full Name (Last, First, Middle Initial) Dr. Richard Carver	Date of Receipt	_		
	Mailing Address P.O. Box 1066			0 6 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.4248	
	Rapid City	SD	57709	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer Self	Occupation			
		Physiciar		_	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	1	
	Other (specify) ▼	0 0	250.00		
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Michael Cedars			Date of Receipt	_
٠.	Mailing Address 3300Webster st., Ste. 1	106		M M / D D / Y Y Y Y	
				05 14 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4211	
	<u>Oakland</u>	CA	94609	Amount of Each Receipt this Period	i
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼	7	
	Primary General	1 1	500.00	1	
	Other (specify) ▼			1	
s	UBTOTAL of Receipts This Page (optional)			1050.00	
$\vdash$			•		
T	OTAL This Period (last page this line number o		I.		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 40		
	EMIZED RECEIPTS		or each category of the	(check only one)		
••			Detailed Summary Page	X   11a     11b     11c     12     13     14     15     16     17		
Δη	y information copied from such Reports and St	atomonte may	y not be cold or used by any perso			
or	for commercial purposes, other than using the	solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	PlastyPAC					
	Full Name (Last First Middle Initial)					
A.	Full Name (Last, First, Middle Initial) Dr. June Chen			Date of Receipt		
	Mailing Address 3980 S. 700 E., Ste. 23	}		M M / D D / Y Y Y Y		
	-			06 17 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4381		
	Salt Lake City	UT	84107	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Self	Occupation Physician		7		
	Receipt For:		Year-to-Date ▼			
	Primary General			1		
	Other (specify)		500.00			
В.	Full Name (Last, First, Middle Initial) Dr. Andrew Cohen	Date of Receipt				
	Mailing Address 8631 W. 3rd St., Ste. 8	M M / D D / Y Y Y Y				
				06 19 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4413		
	Los Angeles	CA	90048	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	·					
	Name of Employer Self	Occupation				
	·	Physician		_		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1		
	Other (specify)		450.00			
C.	Full Name (Last, First, Middle Initial) Dr. Mathew Conrad			Date of Receipt		
٠.	Mailing Address 1700 Waterfront Parkw	av		M M / D D / Y Y Y Y		
		<u></u>		06 25 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4445		
	Wichita	KS	67206	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer	Occupation	2			
	Self	Physician				
	Receipt For:		Year-to-Date ▼			
	Primary General		250.00	1		
	Other (specify) ▼	0 0	250.00			
٩	UBTOTAL of Receipts This Page (optional)			1000.00		
$\vdash$	COLOTAL OF HECEIPLE THIS Page (optional)					
T	OTAL This Period (last page this line number of	. [				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 12/40
	EMIZED RECEIPTS		or each category of the	(check only one)	1 🗖
••	EMIZED RECEIL 10		Detailed Summary Page	X 11a 11b 1	11c   12 15   16   17
Δr	ny information copied from such Reports and St	atemente may	y not be cold or used by any perso		
or	for commercial purposes, other than using the	solicit contributions from	such committee.		
	NAME OF COMMITTEE (In Full)				
$ \rangle$	PlastyPAC				
	Full Name (Last, First, Middle Initial)				
A.	Dr. Mary Ann Contogiannis			Date of Receipt	
	Mailing Address 211 State St.			0 6 0 9	2006
	City	State	Zip Code	Transaction ID: SA	
	Greensboro	NC	27408	Amount of Each Re	
	FEC ID number of contributing			- Amount of Edon No	1 1 1 1
	federal political committee.	C			500.00
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify)		500.00		
В.	Full Name (Last, First, Middle Initial) Dr. J.L Crow			Date of Receipt	
	Mailing Address 1428 Central Ave. NE			M M / D D	/ <b>Y Y Y Y</b>
				06 06	2006
	City	State	Zip Code	Transaction ID: SA	\11A1.4306
	East Grand Forks	MN	36725	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer	Occupation	า	_	
	Name of Employer Self	PHysicia			
	Receipt For:		Year-to-Date ▼		
	Primary General		300.00	1	
	Other (specify) ▼		300.00		
<u> </u>	Full Name (Last, First, Middle Initial) Dr. James Cullington			Date of Receipt	
	Mailing Address 1010 9th St.			M M / D D	/ <b>Y Y Y Y</b>
				06 26	2006
	City	State	Zip Code	Transaction ID: SA	
	Austin	TN	78703	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Name of Employer	Occupation	1	7	
	Self	Physician	ı		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		1000.00		
	Other (specify) ▼			1	
Г					4750.00
s	UBTOTAL of Receipts This Page (optional)				1750.00
				-	
T	OTAL This Period (last page this line number of				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 40		
	EMIZED RECEIPTS		or each category of the	(check only one)		
••	EMIZED RECEIL TO		Detailed Summary Page	X   11a   11b   11c   12   15   16   17   18   19   19   19   19   19   19   19	7	
۸۰	ny information copied from such Reports and St	, not be cold or used by any norse		7		
or	for commercial purposes, other than using the	solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)					
$  \rangle$	PlastyPAC					
$\mathbb{Z}$	•					
	Full Name (Last, First, Middle Initial)			Date of Boardat		
Α.	Dr. Richard D'Amico	NIT		Date of Receipt		
	Mailing Address 180 N. Dean St., Ste. 3	-INE		06 06 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4262		
	Englewood	NJ	07631	Amount of Each Receipt this Period		
	FEC ID number of contributing				1	
	federal political committee.	C		1000.00		
	Name of Employer	Occupation	•	4		
	Name of Employer Self	Physiciar				
	Receipt For:		Year-to-Date ▼	-		
	Primary General	7.99.094.0		1		
	Other (specify) ▼	l	1000.00			
				'		
_	Full Name (Last, First, Middle Initial)					
В.		Date of Receipt				
	Mailing Address 2304 Wesvill Court, Ste	e. 360		06 08 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4282  Amount of Each Receipt this Period		
	Raleigh	NC	27607			
	FEC ID number of contributing				1	
	federal political committee.	C		250.00	Н	
		10				
	Name of Employer Self	Occupation Physician				
	Receipt For:		Year-to-Date ▼	-		
	Primary General	7.99.094.0	1 1 1 1 1 1 1 1	1		
	Other (specify) ▼		250.00			
				'		
_	Full Name (Last, First, Middle Initial)			5. (5		
C.	Dr. Richard DeRamon	0. 000		Date of Receipt		
	Mailing Address 2025 Technology Pkwy	., Ste. 303		05 22 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4225		
	<u>Mechanicsburg</u>	PA	17050	Amount of Each Receipt this Period		
	FEC ID number of contributing				1	
	federal political committee.	C		250.00		
	Name of Employer	Occupation	<u> </u>	-		
	Self	Physician				
	Receipt For:		Year-to-Date ▼	_		
	Primary General			1		
	Other (specify) ▼		250.00			
_						
				1500.00	1	
S	UBTOTAL of Receipts This Page (optional)	<u></u>	<u></u>	1500.00	1	
T	OTAL This Period (last page this line number of		4			

SCHE	DULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 40
	ZED RECEIPTS		or each category of the	(check only one)
I I LIVII	ZED NECEIF 13		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Any info	rmation copied from such Reports and State	omonte may	y not be cold or used by any perso	
or for co	mmercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
\ NAM	E OF COMMITTEE (In Full)			
Plas	tyPAC			
/				
	lame (Last, First, Middle Initial) oseph Disa			Date of Receipt
	ng Address 1275 York Ave.			M M / D D / Y Y Y Y
	1276 1611(7116)			06 12 2006
City		State	Zip Code	Transaction ID: SA11A1.4362
New	York	NY	10021	Amount of Each Receipt this Period
	ID number of contributing	С		500.00
feder	al political committee.	<u> </u>		
Name	e of Employer	Occupation	1	7
Self		Physician	1	
Rece	ipt For:	Aggregate	Year-to-Date ▼	
	Primary General	'''	500.00	
	Other (specify) ▼			
Full N	Jame (Last, First, Middle Initial)			
	onald Ditmars, Jr.			Date of Receipt
Mailir	ng Address 455 Lincoln Rd.			M M / D D / Y Y Y Y
		06 18 2006		
City	one Deint	State MI	Zip Code	Transaction ID: SA11A1.4377
	sse Point	IVII	48230	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		500.00
	·			
Name Self	e of Employer	Occupation		
Booo	int For:	Physician	Year-to-Date ▼	_
nece	ipt For: Primary General	Aggregate	Teal-10-Date ▼	
	Other (specify) ▼		500.00	
	Jame (Last, First, Middle Initial)			Date of Danaist
	Frederick Doepker ng Address 2701 Lincoln Ave			Date of Receipt
iviailli	9 / WO OO 2/01 LINCOIN AVE			06 11 2006
City		State	Zip Code	Transaction ID: SA11A1.4358
<u>Evar</u>	nsville	IN	47714	Amount of Each Receipt this Period
	ID number of contributing	C		250.00
feder	al political committee.			
Name	e of Employer	Occupation	1	7
	,	Physician		
Rece	ipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	250.00	
	Other (specify) ▼			
SUBTO	TAL of Receipts This Page (optional)			1250.00
	2.2.6.2. (26.2.2.2)		······································	
TOTAL	This Period (last page this line number only	v)	•	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 40
ITEMIZED RECEIPTS		or each category of the  Detailed Summary Page	(check only one)  X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PlastyPAC			
Full Name (Last, First, Middle Initial)  A. Dr. E. Ronald Finger			Date of Receipt
Mailing Address 5356 Reynolds St., ste. 505			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.4219
Savannah	GA	31405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Dr. E. Bradley Garber			Date of Receipt
Mailing Address 1784 S. Utica Ave			06 20 7 9 9 9
City	State	Zip Code	Transaction ID: SA11A1.4414
Tulsa	OK	74104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Self	Occupation		
Receipt For:	Physician Aggregate	Year-to-Date ▼	-
Primary General Other (specify) ▼	93.53	500.00	
Full Name (Last, First, Middle Initial)  Dr. Daniel Garitano			Date of Receipt
Mailing Address 4139 Boardman Canfie	eld Rd., Ste.	2	06 05 2006
City	State	Zip Code	Transaction ID: SA11A1.4304
Canfield	OH	44406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Self	Occupation Physician		
Receipt For:		Year-to-Date ▼	_
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last nage this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 40 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X   11a
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Sandra Gatt			Date of Receipt
	Mailing Address RR 1, Box 4250			0 6 1 9 2 0 0 6
	City Monmouth Junction	State NJ	Zip Code 08852	Transaction ID: SA11A1.4401  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Peter Gee			Date of Receipt
	Mailing Address 3 Woodland Rd., Ste. 2	16b		06 09 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.4333
	Stoneham	MA	02180	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Robert Gotkin			Date of Receipt
	Mailing Address 625 Park Ave			05 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4241
	New York	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	<del></del>	Year-to-Date ▼	7
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/40	
ITEMIZED RECEIPTS			or each category of the	(check only one)
••	EMIZED RECEIL 10		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Δr	ny information copied from such Reports and St	atemente may	unot he sold or used by any nerso	
or	for commercial purposes, other than using the	solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
<u></u>	Full Name (Last, First, Middle Initial)			
A.	Dr. Mark Granick			Date of Receipt
	Mailing Address 90 Bergen St., Ste. 7200			M M / D D / Y Y Y Y
City		Ctoto	7in Code	06 11 2006
	City Newark	State NJ	Zip Code 07103	Transaction ID: SA11A1.4341
	•	INU	07103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General			
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Dale Guillory			Date of Receipt
	Mailing Address 39 East First St.			M M / D D / Y Y Y Y
				06 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4270
	Cookeville	<u>TN</u>	38501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Self	Occupation	n	-
	Self	Physiciar		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0	300.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Dr. Jack Gunter			Date of Receipt
	Mailing Address 8144 Walnut Hill Lane,	Ste. 170		M M / D D / Y Y Y Y
	0::		7' 0 1	06 04 2006
	City Dallas	State TX	Zip Code 75231	Transaction ID: SA11A1.4264
		1/	73231	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self	Occupation		7
	Receipt For:	Physician	n e Year-to-Date ▼	_
	Primary General	Aggregate	rear-to-Date V	
	Other (specify)		1000.00	
				2000.00
S	UBTOTAL of Receipts This Page (optional)	<u></u>	<u> </u>	2000.00
T	OTAL This Period (last page this line number of			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 40 (check only one)    X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) PlastyPAC			
Full Name (Last, First, Middle Initial) Dr. Karol Gutowski Mailing Address 600 Highland Ave., Ste H5/3  City State			Zip Code 53792	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Madison  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General	Occupation Physician	1	500.00
	Other (specify)   Full Name (Last, First, Middle Initial)	0 0	500.00	
3.	Dr. Stevphen Hardy  Mailing Address 614 W. Spruce St.			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: SA11A1.4250
	Missoula  FEC ID number of contributing federal political committee.	C	59802	Amount of Each Receipt this Period  500.00
	Name of Employer Self	Occupation Physician		7
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
 C.	Full Name (Last, First, Middle Initial) Dr. J. Benjamin Hugo			Date of Receipt
	Mailing Address 1101 First Colonia Rd., S	Ste. 201		0 6 0 3 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Viscinia Basela	State	Zip Code	Transaction ID: SA11A1.4300
	Virginia Beach  FEC ID number of contributing federal political committee.	C	23454	Amount of Each Receipt this Period  500.00
	Name of Employer Self	Occupation Physician	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
S	UBTOTAL of Receipts This Page (optional)			1500.00
T	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 40 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) PlastyPAC	name and address of any political committee to	Solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Debra Johnson  Mailing Address 95 Scripps Dr.  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General	State Zip Code CA 95825  C  Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  M M M / 20 / 2006  Transaction ID: SA11A1.4416  Amount of Each Receipt this Period  500.00
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Ronald Johnson	500.00	Date of Receipt
Mailing Address 7910 Wolf River Road  City  Germantown  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General	State Zip Code TN 38138  C  Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: SA11A1.4296  Amount of Each Receipt this Period  1000.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Dean Johnston  Mailing Address 4106 W. Lake Mary Blv		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Lake Mary  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary  General	State Zip Code FL 32746  C  Occupation Physician Aggregate Year-to-Date ▼  250.00	Transaction ID: SA11A1.4227  Amount of Each Receipt this Period  250.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		1750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 40 (check only one)  X 11a 11b 11c 12
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PlastyPAC		••	
	Full Name (Last, First, Middle Initial) Dr. Loree Kalliainen  Mailing Address 640 Jackson St.  City St. Paul  FEC ID number of contributing federal political committee.  Name of Employer Self	State MN  C  Occupation Physician		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Dr. Ram Kalus Mailing Address 1301 rtaylor St., Ste. 10.  City Columbia FEC ID number of contributing federal political committee.	State SC	Zip Code 29201	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician Aggregate		
Э.	Full Name (Last, First, Middle Initial) Dr. Denise Kenna Mailing Address 1936 Powder Mill Rd.  City york  FEC ID number of contributing federal political committee.	State PA	Zip Code 17402	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self  Receipt For: Primary General Other (specify)	Occupation Physician Aggregate		
SI	UBTOTAL of Receipts This Page (optional)		·····	1000.00
T	OTAL This Period (last page this line number or	nly)	<b>)</b>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 40
ITEMIZED RECEIPTS			or each category of the	(check only one)
	LIMIZED RECEIF 13		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Λn	y information copied from such Reports and Staten	nonte may	not be cold or used by any perso	
or f	for commercial purposes, other than using the name	ne and add	lress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
$\rangle$	PlastyPAC			
_				
	Full Name (Last, First, Middle Initial) Dr. Robert Kevitch			Date of Receipt
Mailing Address 1600 Lehigh Parkway East		<u> </u>		M M / D D / Y Y Y Y
		-		06 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4327
	Allentown	PA	18103	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	<u> </u>		
	Name of Employer	Occupation	1	7
	Self	Physician	1	
		Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼			
	Full Name (Last, First, Middle Initial)			
_	Dr. Alan Kisner			Date of Receipt
	Mailing Address 100 E. Main St.			M M / D D / Y Y Y Y
	01	0	<b>7</b> ' 0 1	05 28 2006
	City	State NY	Zip Code	Transaction ID: SA11A1.4223
	Huntington	INY	11743	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Colf	Occupation		
		Physician	Year-to-Date ▼	-
	Receipt For:	Aggregate	Teal-10-Date ▼	
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial)			Pate of Passial
	Dr. Mark Labowe  Mailing Address 100 UCLA Medical Plaza	010 747		Date of Receipt
	Mailing Address 100 UCLA Medical Plaza,	Ole. /4/		06 19 2006
	City	State	Zip Code	Transaction ID: SA11A1.4399
	Los Angeles	CA	90024	Amount of Each Receipt this Period
	FEC ID number of contributing	С		300.00
	federal political committee.	<u> </u>		555.55
	Name of Employer C	Occupation	1	7
	Self	Physician	1	
		Aggregate	Year-to-Date ▼	
	Primary General		300.00	
	Other (specify) ▼			
SI	JBTOTAL of Receipts This Page (optional)			1050.00
т	TAI This Period (last page this line number only)	1	•	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 2	22 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)	
• • •			Detailed Summary Page	X 11a 11b 11c 15	12 16 <b>1</b> 7
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso		
or	for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such comm	ittee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
	Full Name (Last, First, Middle Initial)				
	Dr. Phillip Lambruschi			Date of Receipt	
	Mailing Address 350 S. 8th St.				0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.447	
	West Dundee	ID	60118	Amount of Each Receipt this P	
	FEC ID number of contributing federal political committee.	C		3	300.00
	Name of Employer Self	Occupation			
		Physiciar			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		300.00		
				1	
	Full Name (Last, First, Middle Initial) Dr. Stephen Lazarus			Date of Receipt	
	Mailing Address 801 N. Weisgarber Rd.,	Ste. 500			006
City		State	Zip Code	Transaction ID: SA11A1.438	
	Knoxville	TN	37909	Amount of Each Receipt this P	
	FEC ID number of contributing		1 1 1 1 1		1 1
	federal political committee.	C			250.00
	Name of Employer	Occupation	1	_	
	Self	Physiciar			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		250.00		
	Curior (openity)	0 0			
<b>)</b> .	Full Name (Last, First, Middle Initial) Dr. Georgew Levine			Date of Receipt	
	Mailing Address 8700 N. Kendall Dr., Ste	. 102			YYY
	City.	Ctata	7in Code		006
	City Miami	State FL	Zip Code 33176	Transaction ID: SA11A1.423  Amount of Each Receipt this P	
	FEC ID number of contributing		00170		
	federal political committee.	C		2	250.00
	Name of Employer Self	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General	-	250.00	1	
	Other (specify)	0 0	250.00		
	IPTOTAL of Possints This Poss (antions!)		_	8	00.00
31	JBTOTAL of Receipts This Page (optional)				
T	OTAL This Period (last page this line number on	ly)			

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 23 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)	445 🗖 40
			Detailed Summary Page	X 11a 11b 1	11c   12 15   16   17
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	on for the purpose of soliciti	na contributions
or	for commercial purposes, other than using the na	me and ado	dress of any political committee to	solicit contributions from s	uch committee.
\	NAME OF COMMITTEE (In Full)				
/	PlastyPAC				
_	Full Name (Last, First, Middle Initial)				
٩.	Dr. James Lin			Date of Receipt	
	Mailing Address 8021 Laguna Blvd., Ste. 3	314		0 6 2 5	2006
	City	State	Zip Code	Transaction ID: SA	
	Elk Grove	CA	95758	Amount of Each Rec	
	FEC ID number of contributing				<del> </del>
	federal political committee.	C			500.00
	Name of Employer	Occupation	1	$\dashv$	
	Solf	Physician			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	' '	500.00	1	
	Other (specify)				
	Full Name (Last, First, Middle Initial)				
3.	Dr. Stuart Lipton			Date of Receipt	
	Mailing Address 591 W. Main St.			0 6 0 9	2006
	City	State	Zip Code	Transaction ID: SA	
	Lewisville	TN	75057	Amount of Each Rec	
	FEC ID number of contributing				<del></del> -
	federal political committee.	C			500.00
	Name of Employer	Occupation	 1	$\dashv$	
	Solf	Physiciar			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)	' '	500.00	1	
	Cities (Specify)	1 1	0 0 0 0 0 0 0	1	
	Full Name (Last, First, Middle Initial)				
Э.	Dr. Herluf Lund			Date of Receipt	
	Mailing Address 17300 N. Outer 40, Ste. 3	300		05 14	2006
	City	State	Zip Code	Transaction ID: SA	11A1.4209
	Chesterfield	MO	63005	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.				
	Solf	Occupation			
	Receipt For:	Physician	n Year-to-Date ▼	$\dashv$	
	Primary General	, iggi egale		1	
	Other (specify) ▼		250.00		
_	UDTOTAL of Descripts This Dec. (1911)				1250.00
5	UBTOTAL of Receipts This Page (optional)				1 1 1 1 1
T	OTAL This Period (last page this line number only	y)	<b>)</b>		

SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 24 / 40
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Betailed Garminary 1 age	13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$  \rangle$	PlastyPAC			
$\angle$				
	Full Name (Last, First, Middle Initial)			
A.	Dr. Lee Malan			Date of Receipt
	Mailing Address 3955 Harrison Blvd., sto	e. U1		06 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.4373
	Ogden Ogden	UT	84403	
	· · ·	01	84403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	rederal political committee.			
	Name of Employer	Occupation	1	
	Self	Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	500.00	
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 851 Meadows Road			06 09 2006
	City	State	Zip Code	
	Boca Raton	FL	33486	Transaction ID: SA11A1.4319
		15	33400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederal political committee.			
	Name of Employer Self	Occupation	1	
		Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	250.00	1
	Other (specify)	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) Dr. Daniel Man			Date of Receipt
•	Mailing Address 851 Meadows Road			M M / D D / Y Y Y Y
	GOT MICAGOWS Fload			06 11 2006
	City	State	Zip Code	Transaction ID: SA11A1.4366
	Boca Raton	FL	33486	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Cambridge	10		_
	Name of Employer Self	Occupation		
	Receipt For:	Physician	Year-to-Date <b>V</b>	-
	Primary General	Ayyıeyale	Toal-to-Date ₹	-
	Other (specify)		500.00	
		0 0		4
ء	UBTOTAL of Receipts This Page (optional)			1000.00
$\vdash$				-

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	
or		ame and add	dress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Peter Marzek			Date of Receipt
	Mailing Address 1871 Nightingale Lane,			05 26 2006
	City	State	Zip Code	Transaction ID: SA11A1.4239
	<u>Tavares</u>	FL	32778	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 250.00	
	Other (specify) ▼			
3.	Full Name (Last, First, Middle Initial) Dr. Nathan Mayl			Date of Receipt
	Mailing Address 6405 N. Federal Highwa			06 04 2006
	City	State	Zip Code	Transaction ID: SA11A1.4256
	Fort Lauderdale	FL	33308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation		7
	·	Physician		-
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		500.00	
<b>D</b> .	Full Name (Last, First, Middle Initial) Dr. Roger Mixter			Date of Receipt
	Mailing Address 5201 N. Port Washingto	n		06 08 2006
	City	State	Zip Code	Transaction ID: SA11A1.4348
	Milwaukee	WI	53217	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
			·	
T	OTAL This Period (last page this line number or	nly)	<b>&gt;</b>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 26 / 40
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	PlastyPAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Brent Moelleken			Date of Receipt
	Mailing Address 120 S. Spalding, ste. 34	06 23 7 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4428
	Beverly Hills	CA	90210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1		1
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Samuel Mucci			Date of Receipt
	Mailing Address 2585 Crooks Rd.			06 05 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.4284
	Troy	MI	48084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Jamsheed Najmi			Date of Receipt
	Mailing Address 201 Union Ave., Bldg #1	05 21 YYYY 2006		
	City	State	Zip Code	Transaction ID: SA11A1.4229
	Bridgewater	NJ	08807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 27 / 40	
	ITEMIZED RECEIPTS		or each category of the	(check only one)  X 11a 11b	110 🗆 10	
			Detailed Summary Page		11c   12 15   16   17	
Ar	y information copied from such Reports and St	atements may	$\gamma$ not be sold or used by any perso	n for the purpose of soliciting	a contributions	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from su	ch committee.	
$  \setminus $	NAME OF COMMITTEE (In Full)					
	PlastyPAC					
_	Full Name (Last, First, Middle Initial)					
A.	Dr. Raja Nalluri			Date of Receipt		
	Mailing Address 2001 Siesta Dr., Ste. 20	17		06 11	2006	
	City	State	Zip Code	Transaction ID: SA1	1A1.4321	
	Sarasota	FL	34239	Amount of Each Rece	ipt this Period	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer Self	Occupation Physician		7		
	Receipt For:		Year-to-Date ▼			
	Primary General		500.00			
	Other (specify)	0 0	300.00			
— В.	Full Name (Last, First, Middle Initial) Dr. Rahull Nath			Date of Receipt		
	Mailing Address 2201 W. holcombe Blvd., Ste 225			M M / D D / 22	2006	
	City	State	Zip Code	Transaction ID: SA11A1.4447		
	Houston	TX	77030	Amount of Each Rece	ipt this Period	
	FEC ID number of contributing federal political committee.	С			1000.00	
	Name of Employer Self	Occupation				
	·	Physician				
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼			
	Other (specify) ▼		1000.00			
C.	Full Name (Last, First, Middle Initial) Dr. John O'Brien			Date of Receipt		
	Mailing Address 7855 38th Aven. N			0 6 2 2 /	2006	
	City	State	Zip Code	Transaction ID: SA1		
	St. Petersburg	FL	33710	Amount of Each Rece		
	FEC ID number of contributing federal political committee.	C			250.00	
	Name of Employer Self	Occupation Physician				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
Г					1750.00	
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>		1750.00	
T	OTAL This Period (last page this line number of	only)	<b>&gt;</b>			

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 40 (check only one)    X
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any perso Iress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Kenneth Odinet			Date of Receipt
	Mailing Address 501 W. Saint mary Blvd.	, Ste. 514		05 27 2006
	City	State	Zip Code	Transaction ID: SA11A1.4244
	Lafayette	LA	70506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Dr. Galen Perdikis			Date of Receipt
	Mailing Address 4500 San Pablo Rd. S Mayo Clinic			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.4280
	<u>Jacksonville</u>	FL	03224	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation		7
	Receipt For:	Physician	n Year-to-Date ▼	_
	Primary General Other (specify) ▼	Aggregate	250.00	
).	Full Name (Last, First, Middle Initial) Dr. Howard Perofsky			Date of Receipt
Mailing Address 682 Hemlock St., Ste. 230				06 09 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.4343
	Macon	GA	31201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
_				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	
or		ame and add	dress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) PlastyPAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Craig Person			Date of Receipt
	Mailing Address 7501 Greenway Center I			06 25 2006
	City Greenbelt	State MD	Zip Code 20770	Transaction ID: SA11A1.4475
	FEC ID number of contributing		20770	Amount of Each Receipt this Period
	federal political committee.	С		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
3.	Full Name (Last, First, Middle Initial) Dr. Nath Rahul			Date of Receipt
	Mailing Address 2201 W. Holcombe Blvd., Ste. 225			0 6 1 1 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.4310
	Houston	TX	77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self	Occupation		7
		Physicia		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	0 0	1000.00	
<b>D.</b>	Full Name (Last, First, Middle Initial) Dr. Norman Rappaport			Date of Receipt
	Mailing Address 6560 Fannin St., Ste. 18	12		0 6 2 1 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.4436
	houston	TX	77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			2000.00
_	OTAL This Deviced (lost none this line accent	ah A		
- 10	OTAL This Period (last page this line number or	пу)		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
An	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	PlastyPAC			
_	Full Name (Last, First, Middle Initial)			Date of Descipt
A.	Dr. Sudarshan Reddy Mailing Address 16100 19 Mile Rd., Ste.	100		Date of Receipt
		100		06 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4339
	Clinton Township	MI	48038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self	Occupation		
	Receipt For:	Physician Aggregate	Year-to-Date ▼	
	Primary General	Aggregate		1
	Other (specify)		300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Bruno Ristow			Date of Receipt
	Mailing Address 2100 Wesbster St., Ste	M M / D D / Y Y Y Y		
	Other			06 23 2006
	City San Francisco	State CA	Zip Code 94115	Transaction ID: SA11A1.4459  Amount of Each Receipt this Period
	FEC ID number of contributing		34110	
	federal political committee.	C		500.00
	Name of Employer	Occupation	1	_
	Self	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0		1
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Thomas Roberts			Date of Receipt
	Mailing Address 100 E. Wood St., Ste. 1	00		M M / D D / Y Y Y Y
	Cit.	01-1-	Zip Code	06 07 2006
	City Spartanburg	State SC	29303	Transaction ID: SA11A1.4274  Amount of Each Receipt this Period
	FEC ID number of contributing		111111	
	federal political committee.	C		250.00
	Name of Employer Self		1	
		Physician		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)		250.00	
_				
	UDTOTAL of Desciots This Days (sell a B	1050.00		
S	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number of	nly)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 31 / 40
	•		Use separate schedule(s) or each category of the	(check only one)
П	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Botanoa Gammary Fago	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any pers	on for the purpose of soliciting contributions
V OI	1 1 1	ame and add	aress or any political committee t	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PlastyPAC			
	FlastyFAO			
	Full Name (Last, First, Middle Initial)			
A.	Dr. Peter Schwartz			Date of Receipt
	Mailing Address 143 Froehlich Farm Blvo	d.		06 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4337
	Woodbury	NY	11797	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Self	Occupation Physician		
	Receipt For:		Year-to-Date ▼	$\dashv$
	Primary General	7.99.094.0		7
	Other (specify) ▼		500.00	
ь	Full Name (Last, First, Middle Initial)			Data of Danaint
О.	Dr. John Sherman  Mailing Address 1016 Fifth Ave.			Date of Receipt
	Mailing Address 1016 FIIIII Ave.			06 24 2006
	City State		Zip Code	Transaction ID: SA11A1.4465
	New York	NY	10028	Amount of Each Receipt this Period
	FEC ID number of contributing	С		350.00
	federal political committee.			556.55
	Name of Employer	Occupation	1	
	Self	Physiciar	ı	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		350.00	
	Other (specify)	0 0		
— С.	Full Name (Last, First, Middle Initial) Dr. Charles Slack			Date of Receipt
	Mailing Address 1105 Central Expresswa	y, Ste. 370		M M / D D / Y Y Y Y
		· <b>y</b> ,		06 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.4493
	Allen	TN	75013	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			
	Name of Employer Self	Occupation		
		Physician		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify)		1000.00	
				_
	<u> </u>			1050.00
s	UBTOTAL of Receipts This Page (optional)	1850.00		
Г				_
T	OTAL This Period (last page this line number or			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 32 / 40	
	EMIZED RECEIPTS		or each category of the	(check only one)	🗖	
••			Detailed Summary Page	X 11a 11b 14	11c   12 15   16   17	
Δr	y information copied from such Reports and St	atemente may	, not be sold or used by any perso			
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from su	ich committee.	
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	PlastyPAC					
_	Full Name (Last, First, Middle Initial)					
A.	Dr. Brian Slywka			Date of Receipt		
	Mailing Address 351 Rolling Oaks Dr., S	Ste.101		M M / D D /		
	0"	21.1	7' 0 1	06 19	2006	
	City They and Cake	State	Zip Code	Transaction ID: SA1		
	Thousand Oaks	CA	91361	Amount of Each Rece	apt this Period	
	FEC ID number of contributing federal political committee.	C			300.00	
	Name of Employer Self	Occupation Physician				
	Receipt For:		Year-to-Date ▼			
	Primary General		000.00	1		
	Other (specify)		300.00			
	Full Names (Last First Middle Initial)					
В.	Full Name (Last, First, Middle Initial) Dr. Gary Smith			Date of Receipt		
	Mailing Address 2 Medical Plaza Dr., St	iling Address 2 Medical Plaza Dr., Ste130				
			06 21	2006		
	City State		Zip Code	Transaction ID: SA11A1.4411		
	Roseville	CA	95661	Amount of Each Rece	apt this Period	
	FEC ID number of contributing federal political committee.	C			500.00	
		10 "				
	Name of Employer Self	Occupation Physician				
	Receipt For:		Year-to-Date ▼	_		
	Primary General	33 0		1		
	Other (specify)		500.00			
C.	Full Name (Last, First, Middle Initial) Dr. Mark Sofonio			Date of Receipt		
	Mailing Address 39000 Bob Hope, Ste.	407		M M / D D /	YYYY	
	Cit.	Ctata	7'- Cada	06 17	2006	
	City Rancho Mirage	State CA	Zip Code 92270	Transaction ID: SA1  Amount of Each Rece		
	FEC ID number of contributing		JEETO	Amount of Lacif Nece	<del> </del>	
	federal political committee.	C			500.00	
	Name of Employer	Occupation	n	_		
	Self	Physician				
Receipt For:			e Year-to-Date ▼	1		
	Primary General		500.00	1		
	Other (specify)	0 0	300.00			
Г						
s	UBTOTAL of Receipts This Page (optional)		1300.00			
F	,					
T	OTAL This Period (last page this line number of	only)	<b>)</b>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
An	y information copied from such Reports and Sta	tements may	v not be sold or used by any perso	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
$\rangle$	PlastyPAC			
<i>r</i>	Full Name (Last, First, Middle Initial)			
۹.	Dr. Somprasong Songcharoen			Date of Receipt
	Mailing Address 2550 Flowood Dr., Ste. 2	200		0 6 1 1 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.4335
	Flowood	MS	39232	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Self	Occupation		7
	Receipt For:	Physicia: Aggregate	n e Year-to-Date ▼	-
	Primary General	, iggregate		1
	Other (specify) ▼		500.00	
3.	Full Name (Last, First, Middle Initial) Dr. Kenrick Spence			Date of Receipt
	Mailing Address 130 Hillcrest St.			M M / D D / Y Y Y Y
	City	C1-1-	7in Carl-	06 26 2006
	City Orlando	State FL	Zip Code 32801	Transaction ID: SA11A1.4489
			32001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	2	
	Name of Employer Self	Occupation Physician		
	Receipt For:		e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial)			
j.	Dr. John Squires  Mailing Address 3003 F. 3rd Ave Ste. 2	00		Date of Receipt
	Mailing Address 3003 E. 3rd Ave., Ste. 2	OD		06 23 2006
	City	State	Zip Code	Transaction ID: SA11A1.4487
	Denver	CO	80206	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			
	Name of Employer Self	Occupation		
	Receipt For:	Physicia:	n e Year-to-Date ▼	-
	Primary General	Aggregate		1
	Other (specify) ▼		500.00	
9	UBTOTAL of Receipts This Page (optional)			1500.00
	CDICIAL OF HECEIPLS THIS Fage (optional)			
т	OTAL This Period (last page this line number or	nlv)		

0	COUEDINE A (EEC Form 2V)			FOR LINE NUMBER: PAGE 34 / 40	
	CHEDULE A (FEC Form 3X)			(check only one)	
ΙT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12	
			Detailed Summary Page	13 14 15 16 17	
۸r	ny information copied from such Reports and St	atomonte may	y not be cold or used by any pers		
or	for commercial purposes, other than using the	name and add	lress of any political committee to	o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$  \rangle$	PlastyPAC				
	FlastyFAO				
<u>/</u>	Full Name (Last, First, Middle Initial)				
A.	Dr. William Rucker Staggers			Date of Receipt	
	Mailing Address 7541 Cipriano Ct.			M M / D D / Y Y Y	
				05 25 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4233	
	<u>Fairhope</u>	AL	36532	Amount of Each Receipt this Period	
	FEC ID number of contributing			050.00	
	federal political committee.	C		250.00	
	Name of Employer Self	Occupation			
		Physiciar			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify)		230.00		
ь	Full Name (Last, First, Middle Initial) Dr. Sam Sukkar			Date of Descript	
Ь.				Date of Receipt	
	Mailing Address 3114 Acorn Wood Way	06 25 2006			
	City	State	Zip Code	Transaction ID: SA11A1.4481	
	Houston	TX	77059	Amount of Each Receipt this Period	
		1/	77039	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	rederal political committee.				
	Name of Employer	Occupation	1	7	
	Self	Physiciar	1		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify) ▼		500.00		
_	Full Name (Last, First, Middle Initial)				
C.	Dr. Prasad Sureddi			Date of Receipt	
	Mailing Address 714 Chase Parkway			05 24 2006	
	City	Ctoto	Zin Codo		
	City	State	Zip Code	Transaction ID: SA11A1.4235	
	Waterbury	СТ	06708	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		250.00	
	federal political committee.				
	Name of Employer	Occupation	1	$\neg$	
	Self	Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General			7	
	Other (specify) ▼		250.00		
				-	
	-				
s	UBTOTAL of Receipts This Page (optional)		1	1000.00	
$\vdash$	ago (optional)			-	

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 35 / 40
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	not be sold or used by any personal read of any personal read of any political committee to	on for the purpose of soliciting contributions
Oi		arie ariu auu	iress or any political committee to	Solicit Contributions from Such Confinitee.
	NAME OF COMMITTEE (In Full)			
/	PlastyPAC			
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Dr. Gregory Swank			Date of Receipt
	Mailing Address 1771 Tate Blvd., SE, St	e. 202		M M / D D / Y Y Y Y
	Cit.	Ctata	7in Oada	06 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.4323
	Hickory	NC	28602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	rederal political committee.			
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	
	Other (specify)	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
В.	Dr. Anne Taylor			Date of Receipt
	Mailing Address 5969 Broad St., Ste. 40	3		M M / D D / Y Y Y
				06 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.4258
	Columbus	OH	43213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	rederal political committee.			
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	500.00	
	Other (specify)	0 0	1 1 1 1 1 1 1	J.
_	Full Name (Last, First, Middle Initial)			
C.	Dr. Dennis Thompson			Date of Receipt
	Mailing Address 1301 20th St., Ste. 460			M M / D D / Y Y Y Y
	011	01-1-	7'- 0-4-	06 12 2006
	City	State CA	Zip Code	Transaction ID: SA11A1.4367
	Santa Monica	CA	90404	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	•			
	Name of Employer Self	Occupation		
		Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Curior (opcony)	1 1	0 0 0 0 0 0 0	1
Г	L			
s	UBTOTAL of Receipts This Page (optional)			1500.00
$\vdash$				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 40 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) PlastyPAC			
<b>A</b> .	Full Name (Last, First, Middle Initial) Dr. Thomas Toohey  Mailing Address 1401 Avocado Ave., Ste  City Newport Beach  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial) Dr. Anthony Tufaro  Mailing Address 601 N. Caroline St.	State CA  C  Occupation Physician		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 601 N. Caroline St.  Mcelderry 8130-D  City  Baltimore  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General  Other (specify)	State MD  C  Occupation Physician Aggregate		Transaction ID: SA11A1.4405  Amount of Each Receipt this Period  300.00
<b>D.</b>	Full Name (Last, First, Middle Initial) Dr. Bernabe Vazquez Mailing Address 3661 S. Miami Ave., Ste  City Miami  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)	State FL C Occupation Physician		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		·····	1550.00
т	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 40	
	EMIZED RECEIPTS		or each category of the	(check only one)	
11	II EIVIIZED NECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
_			, ,	13 14 15 16 17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.	
abla	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
Α.	Full Name (Last, First, Middle Initial) Dr. Deborah White			Date of Receipt	
	Mailing Address 8896 E. Becker Ln., Ste.	. 104		06 26 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4479	
	Scottsdale	AZ	85260	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:		e Year-to-Date ▼	$\dashv$	
	Primary General	7.99.094.0	7 Total to Bate V	7	
	Other (specify) ▼	0 0	300.00		
В.	Full Name (Last, First, Middle Initial) Dr. Steven White			Date of Receipt	
	Mailing Address 1275 21st Ave. North			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.4203	
	Myrtle Beach	SC	29577	Amount of Each Receipt this Period	
	FEC ID number of contributing	EC ID number of contributing			
	federal political committee.	C		75.00	
	Name of Employer Self	Occupation			
	Jeli .	Physicia	n		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		300.00	]	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Robert Wilcox			Date of Receipt	
٠.	Mailing Address 5316 W. Plano Parkway	,		M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O	
	City	State	Zip Code	Transaction ID: SA11A1.4221	
	Plano	TX	75093	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	70000	500.00	
	Name of Employer Self	Occupation Physician		7	
	Receipt For:		e Year-to-Date ▼	7	
	Primary General	39. 59410		7	
	Other (specify) ▼		500.00		
				875.00	
Ls	UBTOTAL of Receipts This Page (optional)		<b>)</b>	-	

SCHEDULE A (FEC Form 3X)			Llea coperate cohedula(a)	FOR LINE NUMBER: PAGE 38 / 40	
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	
1 1			Detailed Summary Page	X 11a 11b 11c 12	
۸۰	y information copied from such Reports and Sta	tomente mo	unot he sold or used by any paras	13 14 15 16 17	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.	
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
$\rangle$	PlastyPAC				
۹.	Full Name (Last, First, Middle Initial) Dr. Alfred Wilder			Date of Receipt	
	Mailing Address 3003 Bee Cave Road, Ste. 203			06 23 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4495	
	Austin	TX	78746	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:	· ·	· e Year-to-Date ▼		
	Primary General			1	
_	Other (specify) ▼		500.00		
3.	Full Name (Last, First, Middle Initial) Dr. Virgil Willard, II			Date of Receipt	
	Mailing Address 1011 N. Lindsay St., Ste	202		05 / 28 / 2006	
	City	State	Zip Code	Transaction ID: SA11A1.4217	
	High Point	NC	27262-3945	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Self	Occupation		7	
		Physiciar		_	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,	
	Other (specify)		250.00		
— Э.	Full Name (Last, First, Middle Initial) Dr. Miguel Yanez			Date of Receipt	
	Mailing Address 735 Ponce De Leon, Ste. 414			06 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.4317	
	San Juan	PA	00917	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Self	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify) ▼		000.00		
S	UBTOTAL of Receipts This Page (optional)			1250.00	
T	OTAL This Period (last page this line number or	) וy)	<b>)</b>		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 39 / 40		
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17		
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) PlastyPAC					
Full Name (Last, First, Middle Initial) Dr. Soheil Sean Younai  Mailing Address 16055 Ventura Blvd., S  City Encino  FEC ID number of contributing federal political committee.  Name of Employer	State CA  C Occupatio	Zip Code 91436	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Self  Receipt For:  Primary General  Other (specify) ▼	Physicai				
Full Name (Last, First, Middle Initial) Dr. Scott Zevonq Mailing Address 75 Central Park W.			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
City	State	Zip Code	Transaction ID: SA11A1.4286		
New York  FEC ID number of contributing federal political committee.	C	10023	Amount of Each Receipt this Period  250.00		
Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician Aggregate				
Full Name (Last, First, Middle Initial) Dr. Richard Zienowicz  Mailing Address 2 Duldey St., Ste. 460			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Providence	State RI	Zip Code 02905	Transaction ID: SA11A1.4272		
FEC ID number of contributing federal political committee.	C	02905	Amount of Each Receipt this Period  500.00		
Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician Aggregate				
SUBTOTAL of Receipts This Page (optional)					
TOTAL This Period (last page this line number of	only)	<u> </u>	44775.00		

## Image# 26950270845

_	^ /^ ^						
S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 40 / 40			
IT	EMIZED DISBURSEMENT		(check onl) 21b 27	y one)  22 X 23 24 25 26 28a 28b 28c 29 30b			
	y Information copied from such Reports at for commercial purposes, other than using						
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
/	PlastyPAC						
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.4207			
۹.	FRIENDS OF GEORGE ALLEN	Date of Disbursement					
	Mailing Address PO BOX 6859			06 06 7 25 7 2006			
	City	State Zip Code		Amount of Each Disbursement this Period			
	ARLINGTON	VA 22206		5000.00			
	Purpose of Disbursement Void October 7, 2005			-5000.00			
	Candidate Name		Category/ Type	IMEMO ITEMI			
	Office Sought: House	Disbursement For: 2006		[MEMO ITEM]			
	χ Senate	X Primary General					
	State: VA District: 00	Other (specify)					
	SIRIE VA DISIDO DO 1			I .			

SUBTOTAL of Disbursements This Page (optional)	•	0.00
TOTAL This Period (last page this line number only)	<u> </u>	0.00